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Bib Data Sheet

CONFIRMATION NO. 9991

SERIAL NUMBER 09/930,105	FILING DATE 08/15/2001	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. 875.054US1
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APPLICANTS

Fred S. Lamb, Solon, IA;

Brian C. Schutte, Iowa City, IA;
Baoli Yang, Cedar Rapids, IA;

** CONTINUING DATA *****

This application is a CIP of 09/512,926 02/25/2000
which claims benefit of 60/121,727 02/26/1999

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 09/17/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IA	SHEETS DRAWING 20	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 9
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

26191
 FISH & RICHARDSON P.C.
 3300 DAIN RAUSCHER PLAZA
 60 SOUTH SIXTH STREET
 MINNEAPOLIS, MN
 55402

TITLE

Use of CLC3 chloride channel blockers to modulate vascular tone

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
RECEIVED 894		



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B1b Data Sheet

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 WHICH CLAIMS BENEFIT OF 60/121,727 02/26/1999

** FOREIGN APPLICATIONS *****

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35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

21186

TITLE

Use of CLC3 chloride channel blockers to modulate vascular tone

FILING FEE RECEIVED 894	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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21186
SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.
P.O. BOX 2938
MINNEAPOLIS , MN
55402

TITLE

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